Weaving the Fabric of Attachment

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Abstract:

This article is the Keynote Address given at the 5th International Integrative Psychotherapy Association Conference in Vichy, France, April 21, 2011. In the article author describes development of secure attachment with the help of the case study.

Key Words: attachment theory; Integrative Psychotherapy; case study

The intent of my presentation today is to get us in the mood- to get us in the mood to be thinking and talking and sharing about all the ways we can help our clients discover what it means to have a secure attachment.

There is no 'how to' manual for creating the felt sense of secure attachment but it is useful to look back at our own work and see what really made the most difference for our clients. To illustrate this, I will present a case study a little later covering a decade of therapy where the end result was a secure attachment. Like time lapse photography, ten years will get compressed into ten minutes, and, like watching in compressed time the metamorphosis of caterpillar to butterfly, I hope you will feel some of the magic of the transformation.

To set the stage I first want to say a bit about what this type of long term and in depth psychotherapy demands from both client and therapist, and I want to talk about some of the theory around contact. I recently saw the term "earned secure" used to describe the achievement of secure attachment after working through the pain, confusion and isolation of insecure attachment. This is no small feat and not for the faint of heart. Here are just a few examples why:

- From the client it demands the courage to fully embrace the inner chaos and despair of feelings he has tried so hard to push away.
- It takes faith that the therapist will not replicate earlier abandonment and leave him before the job is done.
- It takes hope to accept on trust the possibility of fulfilling

relationships and emotional intimacy.

- From the therapist, it is a long term commitment and a decade of work is not unusual for that transition to happen.
- There is the burden of responsibility to contain feelings that seem overwhelming for our client, and at times for ourselves too. I recall the rage and despair one woman felt each time I took a holiday, and her need for me to call her immediately on my return to end the agony of separation. I did suffer alongside her through this.
- We must accept that our need to make an impact may go unmet for years.
- We need to create in our own lives a quality of stability that in turn gives our clients the consistency and predictability of our presence that is required.

On to discussing contact: In his book "Beyond Empathy", Richard asserts that maintaining contact between therapist and client must be the therapist's most central and overriding concern (Erskine, Moursund, Trautmann, 1999). I agree. Contact is a cornerstone in building the foundations of relationship. It is the means by which we reach through defenses and forge attachments by connecting at our most human level.

To explain more about contact means going into Gestalt theory, which is a subject close to my heart since my personal therapeutic roots actually lie in Gestalt Therapy. I did my training as a Gestalt therapist between 1985 and '88. During that same period I began my Integrative Psychotherapy training and in so doing, discovered how much Gestalt theory has contributed to our practice and theory of Integrative Psychotherapy.

The poster boy for Gestalt therapy is, of course, Fritz Perls who carved a radical new direction from the 19thC Psychoanalytic traditions. The therapist came out from behind the inscrutable mask of the psychoanalyst and became more fully engaged in the therapy process - what we now call 'involvement'. In addition, the focus was not on the past – it was present centered, dealing with the here and now. The concepts of contact and interruption to contact stood out solidly in the foreground of Gestalt theory (Perls, Hefferline, & Goodman, 1951).

Both Fritz and Laura Perls were involved in developing the theory of contact. Laura in particular had been influenced by Martin Buber, an existential philosopher born in 1875. A major theme in Buber's writing is that true meaning in our lives is found through relationship with others. Considering this heritage, it is no coincidence that in Integrative Psychotherapy we view the biological imperative for relationship as a primary motivator in human behavior.

Martin Buber made the distinction between the I-it and the I-Thou. The I-it views the other person as an object that is separate from self, that we either use or experience in an impersonal way. By Contrast, the I-Thou does not objectify the other. In the I-Thou encounter, the other is no longer a he or she and barriers are dropped, creating a sacred space involving the full being of each person. Buber believed that God is ever-present in human consciousness and that all human relationships ultimately bring us into contact with God.

In the more pragmatic terms of our clinical practice, the I – Thou is about 'person to person' relating, where 2 people mutually coexist, being fully open to and conscious of the other. This living relationship comes into existence through our attunement, presence and our empathic inquiry, where we explore the moment to moment lived experience of our client's reality.

To Illustrate the development of secure attachment, I will present a Case Study. I want to talk about Jason: firstly, because Jason did reach that place of allowing himself to be fully engaged and vulnerable with a partner in a long term committed relationship, which I believe is an important hallmark of secure attachment. Secondly, his trauma history is not complicated so the underlying architecture of needs, feelings and defense stand out in high definition.

Thirdly, therapy took place over a decade with periods of rapid growth and then plateaus. There were long periods, sometimes years, when we did not meet, but Jason would come back when troubling symptoms re-appeared at developmental milestones such as a committed relationship, career challenges, and marriage. The intense distress connected to those transitions brought Jason back to therapy to rework the many facets of memory, pain and defense, each time with a different level of awareness, intent and outcome.

Jason is animated and expressive, with an emotional intensity that is very appealing and engaging. He conveys a sense of warmth and openness and his training as a performing artist has helped him articulate his feelings and express himself through metaphor. This made my job easier, but did not make his work any less excruciating. Back in November 2000, the main issue Jason presented was conflicted feelings about a relationship, wondering "Is this the right woman for me?" Can I ever get close to any woman? He had noticed a pattern of distancing and de-valuing in previous relationships once the initial connecting phase was over.

In terms of family history, Jason's parents divorced when he was 7 after which he only saw his father for occasional weekend visits. Jason did not think he carried any emotional baggage about this, but in hindsight it is clear this was a devastating event for him. If we think in terms of denial, disavowal and desensitization there was denial of the significance of the trauma, disavowal of the existence of painful feelings and desensitization of feelings through numbing and dissociation. He was on auto-pilot and did not know who was at the controls.

In my Gestalt training there was much emphasis on being in the moment. It took years to fully appreciate the power of being in the moment and to realize what a potent surgical tool this is to cut through psychological defense, and how respectfully and efficiently we can do this through our style of attuned empathic inquiry.

About 3 months after our initial meeting, through phenomenological inquiry, Jason began to bring into focus his fear of commitment, fear of being vulnerable with me, and fear of being trapped. He could now feel a quality of hardness in his sternum which was like a protective shield. When this physiological defense was explored, the full emotional force of separation from father after those week-end visits broke through. He had adored and craved connection with his father, and was inconsolable in his grief when separating after visits. On leaving, his father offered no comfort, just the directive "Don't cry". In this way, Jason's emotional vulnerabilities were not acknowledged, and his needs for security and validation were not met. The pain of separation was almost unbearable, and school on Monday morning would be a spacey fog. Dissociation was the only option in the face of overwhelming pain.

As he began to trust me more, Jason disclosed sexual fantasies that were far from the kind of intimacy he really wanted. He also disclosed using telephone sex lines, and with these disclosures came intense shame and self-loathing. Jason's relational needs for contact were not being met and these telephone conversations with faceless women were substitute satisfactions, but they felt hollow and dirty, and he never felt good about himself after them.

Gestalt theory talks about the needs cycle - when we experience awareness of a need we mobilize ourselves to get that need met from our environment. When that need is met we feel a sense of completion or closure, which is called a Primary Gestalt. When the original need is not met, we begin to look for substitute satisfactions to take its place. When this happens it is called a Secondary Gestalt, which does give closure of a sort, but is always second choice, like telephone sex, and fundamentally unfulfilling.

The shame of revealing his inner turmoil inhibited Jason from really letting me know what was going on, but at nine months into the work, he was moving from 'talking about' to the more risky 'experiencing' his deepest feelings in session.

I now had a clearer picture of the hidden pain Jason suffered as an adult such as the weekends paralyzed by depression and a constant undercurrent of self-loathing just below the surface. There were intrusive sexual fantasies and compulsions to call the sex lines. Unconditional acceptance and normalization helped reduce Jason's shame and self-loathing, and allowed objective

exploration into the motivations and needs that lay behind the compulsive urges. Empathic inquiry into the hopes and dreams which fueled the fantasies helped Jason realize that calling the sex line provided both a jolt of excitement that distracted from his depression, and the illusion of connection that kept his crushing loneliness at bay.

At 15 months into therapy, Jason had periods of dissociation which were terrifying – the lonely disconnected floating feeling was heightened by inner voices telling him he was going insane. In these times, the relational need of having a stable and dependable other was met by me; someone who provided protection from the escalation of fear and helped quiet the inner voices through reassurance, normalization of what he was going through, and my therapeutic presence. More memories came back of his father's leaving, and Jason reexperienced the feelings of failure and powerlessness of being unable to get his parents back together.

One poignant memory that surfaced was of Jason's spending hours by himself shooting hockey pucks into the net behind the house, always imagining his father in the background calling out "Great shot son – way to go". As therapists, we need to continually respect the creative power of fantasy in filling unmet relational needs, but also be attuned to an over-reliance on fantasy as a defense against genuine human connection. These explicit memories had never before been verbalized or openly acknowledged. Putting these types of experiences into words in the context of a supportive empathic relationship hastened the thawing of archaic defenses, setting the stage for the next level of work.

As Jason's relational needs for security were met in therapy, he felt safe enough to take a monumental step, as he totally relinquished control of his feelings allowing me to contain them and keep him safe. He slipped into the vulnerable felt experience of the boy who, again and again, had been overwhelmed by inconsolable pain. Jason was no longer 'talking about' his inner world, but fully immersed in the despair and anguish of his Child ego state. This experience in Integrative Psychotherapy is the supported regression.

A strong therapeutic presence was essential to keep Jason from pulling back into his shell, and was conveyed through the physical anchor of holding my hand as long as needed while he wept, through my words and tone of my voice, and the expression on my face.

I talked about contact in a theoretical way earlier, but it is in moments like this that the "I-Thou" becomes a living relationship which engages every aspect of body and mind. Where, for a little while, nothing else in the universe matters except the acute awareness of some fundamental human essence we share. These are the moments of contact that gradually and cumulatively erode the hardened defenses that keep people so isolated within themselves. It is not a quick fix but it is a healing moment that, once experienced holds the hope it can happen again. Through our contactful presence, we offer a way out of the lonely prison of the hidden self - initially with ourselves and eventually to be experienced with others out there in the world.

Jason's core shame of exposing vulnerability came out in the fear "If you see me like this you will lose respect for me and leave". This is another example of a secondary Gestalt. The child is haunted by the question "Why did you leave me?" Drawing the conclusion "because there is something wrong about me" does help the child make sense of why a parent has left. This is a called a cognitive closure and in the absence of empathic support this decision becomes established as a script belief, out of conscious awareness but still exerting its negative influence.

These fears can also be viewed through the lens of transference – where fears of abandonment by father are projected onto me and we work through, in the now, the fundamental dilemma of defensive self-protection versus allowing full contact. Through the transference, the possibility of a corrective experience exists through learning "In my most vulnerable moments I will be understood and comforted." During the intensity of full regression, it was meaningful to Jason that I felt honored and moved by the work he was doing, which met his need to make an impact on me.

Through 2002 the theme of shame around intrusive sexual fantasies and use of telephone sex lines was still strong. Each time Jason processed shame about phone sex he would come face to face with the desperately lonely part that yearned for the sense of merger, to "share each other's most secret places". Maintaining consistent therapeutic presence kept Jason from getting lost in despair and self-recrimination. Receiving nourishing emotional support became juxtaposed with the early memories of non-support and loss, triggering the release of more pent up grief.

In 2003, there was a certain amount of approach avoidance with Jason in his therapy. The fear emerged "If I let you be too important, then you can hurt me". Separation anxiety had emerged in the transference.

There are different strategies we can use to regulate separation stress; hyper-activating, deactivating, dissociation or collapse. Deactivating by slowing therapy was Jason's way of titrating the intensity of the work. As a boy the separation stress was so acute it did feel like going crazy, and dissociation was a protective mechanism. In the present, Jason felt terror of falling back into that 'crazy' disconnected floating state and thus his need to pull back in therapy.

It is a difficult judgment call as a therapist – how, when and if to confront avoidance. My gut sense was that Jason was doing as much as he could and would flee if pushed or confronted. I decided to just let Jason call the shots.

Not long after, we moved through this impasse and a potent memory surfaced that proved a catalyst for an important shift: Jason told me "I remember the steep hill I walked up every day on my way to school. It was such hard work and I was so alone. I'd see those other kids walking up the hill with their dads and wished so much I had a dad who would help me up the hill, and how much easier that would have made it."

In the evening after this session Jason wept for 2 hours – grieving with abandon and without self-criticism, experiencing a level of self-acceptance he had never felt before. Jason experienced the full depth of his grief without having to deflect or distract from it and after the tears stopped, he tore up the sex line code number. To him, this was symbolic of not wanting to hurt himself anymore and opening himself to full and genuine connections with women.

This was an epiphany in the true sense of the word since he also felt a powerful spiritual awareness and sense of being closer to God – opening himself to the supportive presence of something/someone greater than himself. Now when he thought of that image of the boy without a dad 'walking up the hill to school', he could imagine God giving him the hand he needed.

In Integrative Psychotherapy, the spiritual aspect of human experience has not been emphasized. There is, however, a stance of permission and acceptance, which acknowledges how individual our ways are of connecting with the divine. I do encourage you to read Rebecca Trautmann's article on Spirituality and Psychotherapy which beautifully illustrates this and can be found on the website: www.integrativetherapy.com (Trautmann, 2003).

Three months after his epiphany, Jason began seeing Julie who he married 5 years later in 2008. We had reached a plateau and took an extended break, but more difficult work still lay ahead.

Fast forward to February 2007. In his relationship with Julie, Jason had "talked about" much of his history and inner world but he felt there was still a wall up that prevented him from being more genuine and emotionally real with her. We talked about the importance of being fully vulnerable with Julie and holding nothing back, which in itself brought about intense dread. We reached an impasse, and it took eight more months for Jason to be ready to have this conversation with Julie.

This inner struggle created overwhelming anxiety and feelings of panic about the marriage to Julie scheduled for April 2008. Each successive step in

wedding planning felt like a deepening trap. Stress symptoms such as insomnia, palpitations, sweating and vomiting before performances made it almost impossible to continue with his work. He experienced dread and emotional pain he would not wish on his worst enemy.

We came to a decision to use short-term medication to manage the excruciating anxiety he was experiencing, which allowed him to function at work but did not resolve the inner conflict.

What took us through the impasse was a series of couple's sessions with Julie and Jason where the focus was on allowing full transparency in their relationship. Jason was able to reveal and communicate his most vulnerable feelings to Julie, demonstrating his capacity to tolerate his shame and his fear of rejection "if she really sees who I am". Julie consistently gave Jason the loving message "I'm not going to let you push me away," which is the message Jason had so desperately wanted to hear from his father. For the first time Jason felt truly excited about the shift in his life: he had a sense of 'growing up' into adulthood and gaining the upper hand over the voice that said 'run'. The wedding went ahead and the marriage continues to thrive.

Is the therapy finished? No - there have been many moments where overwhelming dread has broken through. For example, seeing Julie acting in a play as a highly sexualized and passionate woman brought up intense jealousy, abandonment and panic. It was profoundly disturbing for Jason to realize he now felt dependent on Julie – the flip side of his earlier distancing pattern.

Where we are in therapy now is a 'holding and maintaining' phase. By that I mean that the influence of the original trauma is still felt; for example, the urge to run away to avoid being hurt again. However, a conscious decision has been made to not move into defense, but to remain fully open to self and other.

Jason recently told me about seeing a ragged and hollow-eyed man smoking in the shadows totally absorbed in the numbing ritual of his addiction. Jason said, "That could have been me – a mirror of who I could have become. I still struggle every day with that choice of feeling or being emotionally dead. I reach the edge of the pit and feel terror and want to run to numbness, but now I can hear Julie's voice calling from the pit saying 'I'm down here, come and join me' - and I do."

Jason thought for a minute then looked me in the eye and said "I'm proud of myself, you know, I really am proud of myself'.

When I shared this paper with Jason he wept - with compassion for the anguished child he once was, with relief that it was over, and with gratitude for his relationship with me which had helped foster his capacity for secure

attachment. I am blessed to experience the trust and intimacy of this work and those moments in which I gave so much of myself and felt so enriched in return.

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